OCT 2.1 2022

Pro Se 7 (Rev. 12/16) Complaint for Employment Discrimination

UNITED STATES DISTRICT COURT PER—	DEPUTY CLERK
for the	J. OLLINK

for the

District of

Division

	Case No. 1:23-W-1801 - SES
1 a hours her	(to be filled in by the Clerk's Office)
Plaintiff(s))
(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)	Jury Trial: (check one) Yes No
-V-	,)
	,)
FedEx Dipoly Chain))
Defendant(s) (Write the full name of each defendant who is being sued. If the))
names of all the defendants cannot fit in the space above, please	ý)
write "see attached" in the space and attach an additional page with the full list of names.))

COMPLAINT FOR EMPLOYMENT DISCRIMINATION

I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address

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The City york can't
Thought 337-7905
Virappano egmant can

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1	
Name	FedEx Simb Chin, In
Job or Title (if known)	Director Hinton Resorters.
Street Address	335 3. Jahn Chich Bood
City and County	Mak CAN Mak Carty
State and Zip Code	0A 17408
Telephone Number	(An) 792 - 8510
E-mail Address (if known)	opy, yange Fedex, can
Defendant No. 2	
Name	
Job or Title (if known)	
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address (if known)	
Defendant No. 3	
Name	
Job or Title (if known)	
Street Address	4
City and County	
State and Zip Code	
Telephone Number	
E-mail Address (if known)	
Defendant No. 4	
Name	
Job or Title (if known)	
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address (if known)	

Name

Street Address

C.	Place	of Emi	nlovm	onf
℃ •	LIACE	VI LIM		СШІ

П.

The address at which I sought employment or was employed by the defendant(s) is

	City and County Wark Carry
	State and Zip Code
•	Telephone Number (An) 792 - 8560
Basis for Jurise	diction
This action is bi	rought for discrimination in employment pursuant to (check all that apply):
lacktriangledown	Title VII of the Civil Rights Act of 1964, as codified, 42 U.S.C. §§ 2000e to 2000e-17 (race,
	color, gender, religion, national origin).
ſ	(Note: In order to bring suit in federal district court under Title VII, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)
abla	Age Discrimination in Employment Act of 1967, as codified, 29 U.S.C. §§ 621 to 634.
	(Note: In order to bring suit in federal district court under the Age Discrimination in Employment Act, you must first file a charge with the Equal Employment Opportunity Commission.)
	Americans with Disabilities Act of 1990, as codified, 42 U.S.C. §§ 12112 to 12117.
	(Note: In order to bring suit in federal district court under the Americans with Disabilities Act, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)
	Other federal law (specify the federal law):
	Relevant state law (specify, if known):
	Relevant city or county law (specify, if known):

III. Statement of Claim

E.

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

A.	The discriminatory conduct of which I complain in this action includes (check all that apply):		
		Failure to hire me.	
	Ø,	Termination of my employment.	
		Failure to promote me.	
		Failure to accommodate my disability.	
	\square	Unequal terms and conditions of my employment.	
	\square	Retaliation.	
		Other acts (specify):	
		(Note: Only those grounds raised in the charge filed with the Equal Employment Opportunity Commission can be considered by the federal district court under the federal employment discrimination statutes.)	
B.	It is my best re	ecollection that the alleged discriminatory acts occurred on date(s)	
	01/17	2010 (Ai)	
C.	I believe that o	defendant(s) (check one):	
C.	I believe that o	defendant(s) (check one): is/are still committing these acts against me.	
C.	I believe that o		
C. D.	<u>d</u>	is/are still committing these acts against me.	
	<u>d</u>	is/are still committing these acts against me. is/are not still committing these acts against me.	
	<u>d</u>	is/are still committing these acts against me. is/are not still committing these acts against me. discriminated against me based on my (check all that apply and explain):	
	<u>d</u>	is/are still committing these acts against me. is/are not still committing these acts against me. discriminated against me based on my (check all that apply and explain): race	
	<u>d</u>	is/are still committing these acts against me. is/are not still committing these acts against me. discriminated against me based on my (check all that apply and explain): race color	
	<u>d</u>	is/are still committing these acts against me. is/are not still committing these acts against me. discriminated against me based on my (check all that apply and explain): race color gender/sex	
	<u>d</u>	is/are still committing these acts against me. is/are not still committing these acts against me. discriminated against me based on my (check all that apply and explain): race color gender/sex religion	
	<u>d</u>	is/are still committing these acts against me. is/are not still committing these acts against me. discriminated against me based on my (check all that apply and explain): race color gender/sex religion national origin	

The facts of my case are as follows. Attach additional pages if needed.

Pro Se	-7 (Rev. 12/	16) Complaint for F	nployment Discrimination
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		your charge fi	litional support for the facts of your claim, you may attach to this complaint a copy of led with the Equal Employment Opportunity Commission, or the charge filed with the or city human rights division.)
IV.	Exhaus	tion of Federal	Administrative Remedies
	A.		ecollection that I filed a charge with the Equal Employment Opportunity Commission or bloyment Opportunity counselor regarding the defendant's alleged discriminatory conduct
			2010
	B.	The Equal Em	ployment Opportunity Commission (check one):
			has not issued a Notice of Right to Sue letter.
		\square	issued a Notice of Right to Sue letter, which I received on (date)
			(Note: Attach a copy of the Notice of Right to Sue letter from the Equal Employment Opportunity Commission to this complaint.)
	C.	Only litigants	alleging age discrimination must answer this question.
			y charge of age discrimination with the Equal Employment Opportunity Commission defendant's alleged discriminatory conduct (check one):
			60 days or more have elapsed.
			less than 60 days have elapsed.
V.	Relief		
	argumen amounts or exem money of the control of the	ats. Include any of any actual da plary damages clamages.	by what damages or other relief the plaintiff asks the court to order. Do not make legal basis for claiming that the wrongs alleged are continuing at the present time. Include the images claimed for the acts alleged and the basis for these amounts. Include any punitive laimed, the amounts, and the reasons you claim you are entitled to actual or punitive winds breach of control knowed retrement processing the control of worker rocial discrimination. The control of cont

VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

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I agree to provide the Clerk's Office with any changes to my address where case—related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

	Date of signing: 10/10/2
	Signature of Plaintiff Printed Name of Plaintiff A Company of Plaintiff Printed Name of Plaintiff
В.	For Attorneys
	Date of signing:
	Signature of Attorney
	Printed Name of Attorney
	Bar Number
	Name of Law Firm
	Street Address
	State and Zip Code
	Telephone Number
	E-mail Address